



CASE REPORT

MANAGEMENT OF PRAMEHA THROUGH SHODHANA AND SHAMANA- A CASE REPORT

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ABSTRACT

Diabetes mellitus a chronic medical condition, a life style disorder which lasts for a life time. It is an important global health concern of the present era and needs immediate attention. It is a common and very prevalent disease affecting about 25 % of world population, more than 7.1% of adult population in India. The term diabetes mellitus describes a metabolic disorder of multiple etiologies characterized by chronic hyperglycemia with disturbances of carbohydrate, fat and protein metabolism resulting from defects in insulin secretion, insulin action, or both. Among all *santarpanajanyavyadhi*, *prameha* has been explained first and can be understood with Diabetes Mellitus. *Apatarpana* is the first line of treatment in *santarpanajanyavyadhi*. So *rutushodhana* followed by *shamanaoushadiis* effective in treating this condition.

Method: A 46 year aged male with c/o weakness, frequent burning micturation with HbA1C 10.6% came to GovtAyurvedic Hospital, Kampli, Karnataka. On examination and screening he was diagnosed as type 2 DM & treating on the lines of *prameha* with *rutushodhana* & *shamanachikitsa* since 1year.

Results: Significant changes with post HbA1C report and appreciable results in the symptoms were observed. The same line of treatment is continuing since 1 year.

Conclusion: Type 2 DM can be understood on the lines of *prameha*. *Prameha* can be effectively managed with regular *rutushodhana* and *shamanachikitsa*.

Keywords: *Prameha*, *Ayurveda*, Diabetes mellitus, *Rutushodhana*.

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INTRODUCTION

Diabetes mellitus refers to a group of common metabolic disorders that share the phenotype of hyperglycemia. Depending on the aetiology factors contributing to hyperglycemia include reduced insulin secretion, decreased glucose utilization, and increased glucose production. The ayurvedic texts reflect two major categories of *pramehasahaja* & *apathyanimittaja*, out of these *apathyanimittajaprameha* has close resemblance with the contemporary concepts of Type-2 DM. On this basis, *ayurveda* has described *sthulapramehi*, which clearly corresponds to the current concepts of obese and its role in the genesis of type-2 Diabetes. Diabetes literally means “passing through” mellitus means “honey urine” is a clinical syndrome characterized by absolute deficiency of insulin or by resistance to the action of insulin at the cellular level^[1]. DM is one of the most rapidly increasing disease affecting 387 million worldwide population predicted to

reach 592 million by 2035^[2]. *Shodhana* therapy can be conducted as the initial line of treatment before starting the *shamanaushdhi's* in case of *sthulapramehi*^[3]. *Shodhana karma* is well known procedure for its excellency to cure the disease from the root cause^[4]. *Tikshnavirechana* & *Pragadavirechana* is mentioned in *Susruta*^[5]. Both *vamana* & *virechana* act at microcellular level & help to maintain the normal physiology of tissues^[6].

CASE HISTORY

A 46 year male with c/o generalized weakness, frequent burning micturation, noticeable weight loss, excessive thirst, increased appetite, burning & tingling in lower limbs, repeated infection of glans penis since 3 months approached physician, advised blood test & found to be Diabetic with HbA1c 10.6% on 24/09/2018. He was not willing to take allopathic medicines so came to Govt Ayurvedic Hospital Kampli on 27/09/2018 registered with OPD No 1871.

Signs & Symptoms	Duration
Generalized weakness	3 months
Noticeable weight loss	3 months
Repeated infection of glans penis	3 months
Frequent burning micturition	1 month
Excessive thirst	1 month

Increased appetite

1 month

Burning & tingling in lower limbs

15 days

TREATMENT PROTOCOL ADOPTED

Rutushodhana in the form of *virechana* & later *shamanaoushadi*'s adopted.

Table 1 Treatment plan

SLNO	OBJECTIVE PARAMETER & DURATION	TREATMENT	REMARKS
01	24/09/2018, FBS – 192 mg% PPBS - 334mg% HbA1c10.6% ABG 267mg/dl		
02	27/09/2018 to 01/10/2018 for 5 days	<i>Deepana-pachana</i> with Tab <i>chitrakadivati</i> ^[7] 1tid & <i>panchakolachurna</i> ½ tsftid with water	<i>Samyakdeepana-</i> <i>pachanalakshanas</i> attained
03	02/10/2018 to 05/10/2018 for 4 days in increasing dosage pattern based on his <i>agnibala</i>	<i>Shodhanangasnehapana</i> with <i>dhanwantarigritha</i> ^[8] .	<i>Samyaksnighdalakshanas</i> attained
04	06/10/2018 to 08/10/2018 for 3 days	<i>Sarvangaabhyanga</i> with <i>murchitatilataila</i> ^[9] f/b <i>sarvangabaspasweda</i>	
05	09/10/2018 For 1 day	<i>Sarvangaabhyanga</i> with <i>murchitatilataila</i> f/b <i>Virechana</i> with <i>manibhadraguda</i> ^[10] 50gms with <i>ushnaja</i> as <i>anupana</i>	Had <i>madhyamashuddhi</i> with 12 <i>vegas</i>
06	09/10/2018 to 13/10/2018 for 5 days	<i>Peyadisamsarjana</i> adopted	Burning micturition, repeated infection of glans penis reduced remarkably & marked improvement seen in burning & tingling in lower limbs after <i>rutushodhana</i>
07	14/10/2018 to 28/01/2019	<i>Shamanaoushadi</i> 's adopted	Generalized weakness,

		SypPramehanil 4ml bd, Amree Plus granules 1tsfbd, TabGlucomap 1bd	increased appetite & excessive thirst reduced significantly in 1-2 months & Significant weight gain noticed in 3 months after <i>shamanaoushadi's</i>
08	28/01/2019 FBS – 129 mg% PPBS - 199mg% HbA1c7.2% ABG 162mg/dl	<i>Shamanaoushadi's</i> continued for 4&1/2 months	
09	15/06/2019 FBS – 82 mg% PPBS - 122mg% HbA1c5.4% ABG 106mg/dl	<i>Shamanaoushadi's</i> continued till date	

Table 2 : Analysis of signs & symptoms after treatment

BEFORE & AFTER TREATMENT		
Signs & Symptoms	Duration	Outcome after treatment
Generalized weakness	3 months	Reduced significantly in 1-2 months after <i>shamanaoushadi's</i>
Noticable weight loss	3 months	Significant weight gain noticed in 3-4 months after <i>shamanaoushadi's</i>
Repeated infection of glans penis	3 months	Reduced remarkably after <i>rutushodhana</i>
Frequent burning micturition	1 month	Reduced remarkably after <i>rutushodhana</i>
Excessive thirst	1 month	Reduced significantly in 1-2 months after <i>shamanaoushadi's</i>
Increased appetite	1 month	Reduced significantly in 1-2 months after <i>shamanaoushadi's</i>
Burning & tingling in lower limbs	15 days	Marked improvement was seen after <i>rutushodhana</i>

Table 3: *Shamanaoushadi's* used

Sl.No	<i>Shamanaoushadi</i>	Main ingredients
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01	Syrup Pramehnil [Shived Herbals Hyderabad]	<i>JambuBeej, amla, gudmaar, saptarangi, guduchi, bhumiyaamlaki, neempatra, tulasipatra, bilvapatra, karela, methibeej, kalamegha, daruharidra.</i>
02	Amree plus granules [AimilPharmaceuticals India Limited]	<i>Gudmar, guduchi, bilva, bimbi, nisoth, gokhru, punernava, bhringraj, kalmegh, bhuiamla, amla, shatavar, palash, tulsi, ashwagandha, vijaysar, ajmod, methi, inderjav, katuki, shilajitsudh, lavang, karela, karanja, gular, jamun, kalaunji, surajmukhi, vidarikand, safedmusli, kali jeeri, kalimirch, badam, neem.</i>
03	Tab Glucomap [Maharshi Ayurveda New Delhi]	<i>Jambubeej, jamunpatra, matanjak, neempatra, bhoomiamla, bilvapatra, arjunpatra, shudhashilajit, khadira, lodhra, suparideshi, medashring, shwetachandana, raktachandana, shirisha, karanjichaal, agar, daruharidra, karela.</i>

DISCUSSION

Shodhanachikitsa does *nirharana* of *vikrutadoshas* from nearest route and helps in maintaining homeostasis of the body and also helps in rejuvenation. Simple *shamanaoushadi's* are not enough to manage *madhumeha* having *bahudoshalakshana*. *Acharya charaka* has advised *vamana* and *virechana* for *shodhana* in *santarpanajanyamadhumeha*. The *nidanaparivarjana* is difficult task in this fast food life style; hence our body requires *rutushodhana* to achieve *doshasaatmyata*, along with this *shamanaoushadi's* will help in managing this *bahudoshaavasta*. *Virechana karma* helps in removing *vikruta pitta, pitta samsrustakapha* and *meda* from body. After *virechana rasa* and *raktadhatwagni* are

improved and metabolic activities of GIT are brought to normalcy where carbohydrate, protien, fats are metabolized. *Deepanapachana* drugs have the predominance of *tikta, katu, kashaya rasa* and *laghu, rooksha, ushnagunas*. Because of these inherent properties of *amapachana* increase the quantum of *agni*. This will help to erode the *picchilata* of morbid matter, so that the *doshas* may get easily dislodged on further procedure. *Snehapana* is done till *kostasnigdhatais* assessed. *Dhanwantaraghrita* is specifically indicated in *prameha* and its complications. On reviewing the ingredients of this *ghrita* it had fine results in managing the *prameha* and its complications. *Abhyanga&swedana* are helpful to bring the morbid *doshas* from *shaka*

to *kostha*, which are expelled out by *virechana*. As diabetes is a metabolic disorder *Virechana* acts on the site of *pittai*.e on liver & pancreas which helps to reduce hepatic glucose production & overcome the impaired insulin secretion. *Dhanwantaragritha* help to reduce the insulin resistance at cellular level as well as the circulating free fatty acids in the blood. *Manibhadraguda* is mainly *pitta virechaka*& it can eliminate both *kapha*& *pitta* in patients of *prameha*& reduces various enzymes responsible for increased hepatic glucose production hence reduce hepatic glucose production. Thus *Virechana* probably reduces insulin resistance as well as promotes insulin secretion. The *shamanaoushadi's* Amree

plus, *Pramehnil*&*Glucomap* increase insulin sensitivity, supplements essential micronutrients & helps to prevent long term complications of DM. The ingredients contain many potent phytochemicals possessing hypoglycemic activity (e.g. glycosides, flavonoides, terpenes, steroidal saponins, alkaloids, polysaccharides). The selected patent drugs *Pramehnil* manufactured by Sived Herbals, *Amree plus Granules* of Aimil Pharmaceuticals & *Tablet Glucomap* of Maharshi Ayurveda mostly acts by its *vyadhipratyanikaguna*. The pilot study on *Tab Glucomap* has significant hypoglycemic & hypolipidemic properties & also improves the quality of life of NIDDM patients^[11].

Table No 4: Medicinal drugs possessing anti-diabetic properties^[12]

Gurmar(<i>Gymnemasylvestre</i>)	It has been reported to be an effective anti-diabetic agent in lowering blood sugar in both type I and type II diabetes
Karela(<i>Momordicacharantia</i>)	It probably acts through an extra pancreatic mechanism such as improving glucose tolerance, promoting peripheral glucose utilization, decrease blood glucose synthesis.
Neem(<i>Azadirachta indica</i>)	Neem leaf extracts have been scientifically proved to be effective in treating and preventing diabetes
Sadabahar(<i>Catharanthus roseus</i>)	A significant anti hyperglycemic activity of leaf extract of leaves and twigs is reported in laboratory animals
Vijaysar (<i>Pterocarpus marsupium</i>)	It restores the normal insulin production of the pancreas and stabilizes the normal sugar levels.
Guduchi (<i>Tinospora cordifolia</i>)	The oral administration of an aqueous root extract is reported to exert a significant reduction in blood glucose and brain lipids.
Methi (fenugreek)	Fenugreek seed in powder or germinated form exhibits anti-diabetic properties & have been reported to lower blood glucose

	levels
Ghritkumari (Aloe Vera)	The phytosterols present in the aloe vera gel have a long term blood glucose level control effect and would be useful for treatment of Type I and Type II diabetes mellitus
Turmeric (Curcuma longa)	It lowers blood sugar, increases glucose metabolism. The rhizome extract of the plant is shown to lower blood glucose in experimental, induced- diabetic rats.

CONCLUSION

Prameha is one among *mahaagada* having poor prognosis, incurability and development of complications hence early diagnosis and proper treatment will give better results. *Rutushodhana* especially *virechana* plays a vital role in preventing the disease and to support the line of treatment in avoiding the complications. Not only *shodhana* is important even *shamanachikitsa* has a vital role in removing the *kledatwa* which is the main culprit in *vyadhisamprapti* and hence is of prime importance. So *rutushodhana* in the form *virechana* during *sharadrutu* followed by *shamanaoushadi's* are effective in managing this condition.

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Cite this article as:

Santosh.S.Tadapatri, Santosh.L.Yadahalli, Ananta. S. Desai, Ahalya.Sharma. Management of Prameha through Shodhana and Shamana- A Case Report. *J of Ayurveda and Hol Med (JAHM)*.2019; 7(5): 55-62

Source of support: Nil

Conflict of interest: None Declared